



Coalition Briefs

A SEMI-MONTHLY UPDATE ON COMMUNITY MENTAL HEALTH IN NEW YORK

1998 COLA funds flow

In the calculations surrounding the distribution of 1998 COLA funds, OMH identified about 500 agencies as eligible for the COLA allocation. Of those, 92 either did not return a survey or returned a survey but not a Board resolution. Over 40 providers declined the COLA allocation.

OMH was able to leverage more Medicaid dollars than was originally anticipated. As a result, approximately \$18 million was available for the COLA, up from the \$11.7 million originally anticipated. Because of this, the money sent to providers **should cover ALL program employees.**

Agencies still have a limited window

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2 bills - 7 SNPs

State Senate Mental Hygiene Committee Chair Thomas Libous has introduced a bill (S4283) to authorize a seventh Special Needs Plan (SNP). The bill is co-sponsored by Senate Health Committee Chair Kemp Hannon. An almost identical bill has been introduced in the Assembly (A6781) by Mental Hygiene Committee Chair James Brennan. The Coalition has long supported a seventh SNP, which would likely go to New York City. □

Coalition's Mildred Allen is promoted

Mildred Allen, Ph.D. has been named Senior Vice President for Behavioral Healthcare and Substance Abuse Services for the St. Barnabas Hospital Network. She will add this duty to her responsibilities as Executive Director of Fordham-Tremont Community Mental Health Center and Vice President of The Coalition of Voluntary Mental Health Agencies. We congratulate Dr. Allen on her new position. □

Coalition conference cometh

Business and Practice Imperatives: A Future Look at Behavioral Healthcare is the subject of the second annual conference presented by The Coalition and the New York State Council for Behavioral Healthcare. Cooperating with the National Council for Community Behavioral Healthcare and supported by Janssen Pharmaceutica, the two-day conference will be held at Fordham University.

Survival in a changing health care economic environment is the biggest issue facing voluntary providers today across the country and especially in New York. The conference presenters plan to provide information in strategic planning, costing and marketing of services as well as pertinent clinical issues in the delivery of mental health and addiction services in a health reform climate.

Open Minds, a renowned consultancy company in behavioral health business development, and SAMHSA (Substance Abuse and Mental Health Services Administration), the federal agency responsible for research and development in the delivery of behavioral healthcare, have both agreed to provide experts and conduct hands-on training for participants in the two day conference which is aimed at administrators, policy makers and practitioners. □

Legislators feel budget pinch

As of the writing of this document the New York State budget is no closer to completion than it was on April 1st when the deadline passed. Until the two houses of the legislature can agree on revenue figures, they are unlikely to begin negotiating how money should be allocated. At that time we expect conference committees comprised of members of both

houses (and hopefully the Governor's staff) to determine fund allocations.

The twist on years past is that on Wednesday the 14th of April the members of the legislature did not receive their regularly scheduled paycheck. A lawsuit filed by Assembly Health Chair Richard Gottfried seeks to overturn the law withholding paychecks from legislators until the budget is passed. Meanwhile the Governor hopes that the personal pinch on legislators will help move the public policy in a more conservative direction. We, of course, view the delay as an opportunity for our friends in the legislature to find the necessary dollars to fund a trended increase, and increased children's mental health and MICA services. □



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Coalition hosts forum on Involuntary Outpatient Treatment

On Friday, April 9th the Coalition hosted a forum on Involuntary Outpatient Treatment: Issues and Solutions. The blue-ribbon panel presented a broad range of perspectives on this very current issue to the nearly 100 forum attendees.

After some welcoming remarks from Coalition President Alan Siskind and F.E.G.S. host Jonas Waizer, Neal L. Cohen, M.D., Commissioner of the New York City Departments of Health and Mental Health, Mental Retardation and Alcoholism Services outlined the highlights of the DMHMRAS and HHC proposal. Dr. Cohen stressed that this subject is part of the larger discussion of "lessons learned" on how to deal with difficult-to-treat, non-compliant people with mental illness. DMH and HHC are seeking a statewide, permanent expansion of the Bellevue pilot program, utilizing two types of coordinating teams: a hospital-based team, responsible for the initial order and discharge of the patient, and a regional team, responsible for implementation of the order on the patient's release.

Commissioner Cohen was followed by Howard Telson, M.D., Director of the Bellevue Hospital Center Involuntary Outpatient Commitment Pilot Project. Dr. Telson stressed that the Bellevue Pilot Project is a work in progress. He views the Pilot Project as a great success. Even though it is sunsetting on June 30, 1999, Bellevue is still getting referrals all the time. About 3/4 of the inpatients are neutral about the court order; they simply want a good treatment plan and services. However, he believes the mobilization of services is enhanced by the outpatient commitment order, which gives the mandate to go forward. He sees outpatient commitment as an alternative to inpatient commitment, not as an alternative to freedom in the community.

Dr. Telson was followed by Barbara Jones, Associate Attorney at the New York

State Mental Hygiene Legal Service. Ms. Jones served as the principal attorney for all of the patients in the Pilot Project. This was a new role for MHLS, which up until the Pilot Project had traditionally represented mental health inpatients, not persons in outpatient treatment. MHLS is not taking a position for or against IOC, as many of their clients swear by the Pilot Project as swear at it. It is clear, however, that enhanced services produce a better outcome. Ms. Jones highlighted four key points. (1) New York State should make a commitment to outpatient *treatment* first. (2) A small percentage, 10% or less, of patients, those with little insight but great respect for authority, benefit from the court order, taking their medications, for example, only because of the order. (3) Other patients resented coercive interventions, even planning to leave the jurisdiction because of the threat of the court order. Thus she concludes that the court order aspect of the Pilot Project may well have harmed these people. (4) A third group, about 80% of the total, was generally willing to comply with treatment, occasionally falling off. These patients benefited from the enhanced services, but often lost track of the very existence of the court order.

Following Ms. Jones to the podium was Jody Silver, Director of Advocacy for Community Access, Inc. Ms. Silver emphasized that consumers, and indeed everybody, agree on the need for coordinated services. The problem is how to help the people who are falling between the cracks. People need *adequate* services, medication coordinated with other services such as rehab. Consumers are afraid of coercion. In her view forced treatment is costly, is a form of abuse, and interferes with recovery. Senator Libous is expected to produce a bill that would try to integrate health care proxies and advanced directives with outpatient services, as an *alternative* to involuntary outpatient commitment. She stressed that, most importantly, more money is needed for services, better dis-

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1998 COLA money moves

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of opportunity to participate in the much-expanded COLA program. **OMH has set aside dollars for agencies that returned a survey but have not yet sent in the required resolution from the Board. Similarly, dollars are being held back (based on 1996 CFR data) for agencies that returned neither a survey nor a resolution.**

Providers who declined the COLA based on the fact that the allocation would not cover all staff *may* be able to reverse their decision. Although there is no definitive answer from OMH on this yet, if you feel you may wish to change your decision, we recommend that you contact OMH.

OMH is willing to accept applications for adjustments from agencies where all staff were not covered by the allocation. Applications will not be processed until all agencies that are eligible for the COLA have been accounted for, but at a later date, OMH will readjust the amounts.

There is currently no "drop dead" date when providers will no longer be permitted to send in surveys or Board resolutions. We will inform you as soon as we hear of a date, but **we recommend that you make your decisions and contact OMH as soon as possible.**

On March 31, 1999, OMH and OASAS both distributed the monies for the 2.5% COLA allocated in the 1998 legislative session. OMH Medicaid dollars for the period from April 1, 1998 through March 31, 1999 will be distributed in a lump sum as a Medicaid rate adjustment that will be applied to services provided from January 1, 1999 through March 31, 1999.

If you have further questions, or need more information, contact Joshua Rubin at (212) 586-4555x17 or jfrubin@cvmha.org.

Free training for disabled

The Downtown Community Television Center is offering a free basic video production workshop to people with disabilities. The program is taught by a qualified media arts instructor and is designed to help people with disabilities use video to make their voices and their stories heard. Class size is very limited. For more information, contact John Kaplan at (212) 966-4510. □

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— Help Wanted —

Involuntary Outpatient Treatment forum

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charge planning and for coordinating teams.

NAMI NYC Metro President Michael Silverberg articulated the position of the family members who feel that they need help from the government to care best for their relatives. He stated that both groups in the Pilot Project accepted the services of the Project. Both groups did better with the Project's coordinated services. He reports that for those persons who need the compulsion of such a Project, their families are desperate for such a mechanism.

The final panelist to speak was John Gresham, Senior Litigating Attorney at New York Lawyers for the Public Interest. Mr. Gresham addressed the results of the PRA study. In his analysis everybody did better after the coordinated services of this Project, in about an equal measure. He reports that the PRA study shows that services work, period. Mr. Gresham also discoursed on the bills already proposed. He indicated that the criteria and scope of Attorney General Spitzer's bill are significantly broader than those of the current law, and another proposal by Assembly-member Ravitz is still broader. Mr. Gresham views both approaches as unconstitutional. For example, Eliot Spitzer's bill would apply to any person with a hospitalization in the past 36 months, who "failed to comply" with a Doctor's orders on one or more occasions. We have all, he reminded us, failed to comply with our doctor's or-

ders on one or more occasions. Ravitz goes still further, to a five-year period and a prediction of noncompliance.

Following the formal presentations was a question and answer period that was very lively. The Coalition is thankful to the panelists who agreed to present for us and we hope that we will be able to put together more forums on important public policy issues in the future. □

Member Notes

The **Staten Island Mental Health Society, Inc.** (SIMHS) will sponsor a free childhood depression screening on Tuesday, May 4th, 1999 in recognition of Children's Mental Health Week (May 2-8). The screenings will be available from 3-7 p.m. at three locations: SIMHS Chait Memorial Center (669 Castleton Avenue), SIMHS Family Support Program (14 Slosson Terrace) and SIMHS South Shore Center (3974 Amboy Road). All results are confidential. For more information contact Almeda Sabido at (718) 442-2225. □

Free furniture

The first Coalition member agency that calls to arrange pickup of an approximately 3x6-foot folding-leg conference table can have it free. Contact Melinda at (212) 586-4555x11. □

Clinical Social Worker: Full time - (Bronx, Inwood and Yonkers) - Conduct pre-screening interviews, intake evaluations, individual, family and marital therapy. Conduct crisis intervention interviews. Complete statistics, recordkeeping in accordance with program requirements. Participate in case presentations at staff meetings and in supervision. MSW Clinical Experience with children and adults. State certification in social work. Bilingual (Spanish-English)

Clinical Social Worker: Full-time (Rockland County) - Provide counseling to children, adolescents and families in the Rockland area. Work on a collaborative basis with other regional counselors in the Hudson Valley area. Certification in Social Work. Bilingual (Spanish-English)

Counselors: Hourly - late afternoons and evenings - (Manhattan location) Position provides counseling to individuals, married couples and families. Work on a collaborative basis with team and supervising psychologist. MSW or Doctoral student in clinical psychology who has completed internship and other requirements except dissertation. State certification in social work where appropriate or evidence of completion of internship in clinical psychiatry. Bilingual (Spanish-English).

Send resume, salary requirements and include job title in your response to **Catholic Charities**, 1101 First Ave., Room 1113, New York, NY 10022 or fax to (212) 826-8795. □

F.E.G.S. Team Leader Position: The successful applicant will be a dynamic individual with excellent social and problem solving skills, able to speak with other providers and community resources. He/She will be a self-starter and quick learner.

The team leader will supervise clinical staff and provide administrative back-up to the Program manager of a large, busy state-of-the-art community based counseling center. Experienced CSW with three years of supervisory experience required, "R"#, and a history of working in short-term and group therapy modalities.

Fax resumes to Judy Cohen at **F.E.G.S.** at (212) 366-8555. □

Upcoming Events

- April 19 MICA Committee at The Bridge
- April 21 MCTA: Time Based Treatment at UJA
- April 22 Membership meeting at CVMHA
- April 27 MCTA: Quality Assurance at CSS
- April 29 Government Relations Committee at CVMHA
- May 5 Membership Committee at PRFI
- May 13 Finance Committee at CVMHA
- Executive Committee at CVMHA

June 10 Mental Health Awards at Pfizer World Headquarters
June 22-23 Best Practices Conference at Fordham